

A Path for Rural Resilience

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Most of the earliest scholarship on disasters came from sociologists, who defined disasters broadly as any event or phenomenon that disrupts society's day-to-day functioning on a scale that overwhelms society's ability to restore normalcy without external support. To illustrate, if a tree falls on a home—depending on the size of the tree—it could be a disaster for people in the home. Still, this represents only a routine emergency for the local emergency response team, and even a volunteer response team will likely be able to mobilize enough people and equipment to remove the tree. Alternatively, imagine if multiple days of heavy rain and strong winds caused hundreds of trees to fall, damaging dozens of homes, streets and power lines. In this case, the city might have to call on neighboring municipalities, the state or the federal government for additional capacity to restore normalcy. Ideally, the city would have recognized the potential of such circumstances and acted in advance to adopt policies limiting development in areas with lots of trees or strengthening building standards to ensure public and private property could withstand the impact of fallen trees. In this chapter, we submit that community survival requires that all members of the community have access to employment, income and savings sufficient to afford homes that can withstand “fallen trees” and that they not fall into poverty as they try to restore normalcy to their lives.

Among professional emergency managers and those who study disasters, resilience is commonly defined as the ability to anticipate and prepare for disasters, so a community can absorb and fully recover. Shocks to communities from weather-related disasters (e.g., tornados, hurricanes, ice storms and wildfires) expose the fragmented, inequitable systems that work for some people, but not for all. These shocks, or disasters, provide a suitable frame for thinking about community resilience in response to other kinds of crises (i.e., loss of a major employer, public health crises, school shootings, etc.). Therefore, the term “disaster” should be applied broadly to any situation to describe any severe, sudden or sustained disruption to a system or set of systems in a community that causes those systems to function at

less-than-optimal capacity. In this sense, too many rural communities are in a perpetual state of disaster due to a lack of inclusive, forward-thinking leadership and a lack of investment in critical practices and policies that support resilience.

The path to resilience in rural communities starts with developing a local plan that seeks to maximize the health, safety and economic well-being of everyone in the community. Effective resilience planning gathers data to assess community resilience threats, engages community stakeholders in determining the most appropriate strategies for mitigating threats, and positions everyone in the community to meaningfully contribute to implementing the priority strategies. This work requires coordination and collaboration of the different systems that together represent the building blocks of a community, including those related to the local economy and workforce, education, finance, environment/natural resources, transportation, health, etc. When sufficiently accounted for and strategically aligned in a resilience plan, these myriad systems constitute an infrastructure of opportunity, and everyone in the community has the resources to know how the systems work and that they will achieve their full potential without fear of disaster.

The remainder of this chapter describes the development process and key elements of a community resilience plan, based on the lessons from MDC's research and practice.

Community Engagement and Co-Development of a Resilience Plan

Developing a plan for community resilience is no different from other planning processes, beginning with the identification of a representative group of stakeholders to lead the process. This local task force should include not just those people in traditional leadership functions (e.g., city or local governmental officials, and fire, police and medical personnel), but concerned citizens as well. To be effective, resilience planning needs to address deep disparities and inequitable socioeconomic fragmentation. Keep in mind: A community is only as resilient as its most vulnerable citizens. Rural communities tend to have higher concentrations of people who are more likely to experience the impacts of disasters disproportionately (e.g., poor, disabled, elderly and unemployed) due to system inequities and scarce

resources. In short, a process that does not include those most affected by the outcome will result in a flawed plan.

MDC's July 2005 partnership with the Federal Emergency Management Agency (FEMA) to launch the Emergency Preparedness Demonstration (EPD) is an example of how to undertake an inclusive community resilience planning process. The EPD identified six communities with barriers to disaster awareness and preparedness among the most vulnerable members in the community and identified strategies to overcome those barriers. A vital feature of this place-based approach was establishing partnerships with local nonprofits and other agencies trusted by community stakeholders and with a demonstrated track record of successful program implementation. We intended to find organizations anchored in the community with the desire and capacity to serve as the brokers of new relationships, repositories of new knowledge and beneficiaries of expanded capabilities to ensure the resulting plans would take root. A critical feature of the EPD approach was establishing community planning teams composed of stakeholders representing the community's diverse interests who could provide local knowledge about disaster issues and formulate solutions according to their priorities.

Successful recruitment of team members began with personal contacts brokered by trusted agents and one-on-one relationships. It also required adaptation of recruitment strategies to fit the local cultural and historical context. For example, we took time to learn about the history of a place, what topics might deepen social divides if not handled with care, and what public spaces were most conducive to authentic conversations. For these reasons, recruitment strategies were often multipronged, with potential participants identified early and encouraged to participate through personal contact. In some cases, however, the well-developed social network required for this approach was not present in the rural communities. Instead, local agencies had to rely on several longtime residents to recruit highly respected individuals that were trusted by community residents, as well as representatives of community-based service providers (e.g., churches, child care services and the housing cooperative). Lastly, planning grants were provided to enable team members to engage meaningfully in the process.

The practice of providing resources to enable laypersons to participate in strategic conversations is informed by MDC's decades of experience in

community-based work. In the EPD, every community received a small grant to cover the cost of meeting space, food and materials for the planning process. The planning grant could also be used to partially reimburse the local partner for a project coordinator's time and effort.

Community Assessment

After identifying key stakeholders for the planning team, the collaborative work began, which included gathering data to illuminate current conditions, creating a shared vision of the future and identifying the most appropriate strategies for achieving that vision. MDC and its partners used a participatory action research approach throughout the EPD planning process to identify issues, initiate studies and facilitate actions—all in collaboration with residents.

A participatory approach to resilience planning is helpful in rural communities for many reasons. First, a participatory approach can address recent demographic shifts in rural places and foster community engagement to enhance and strengthen democratic participation, while increasing public transparency. Second, there are often gaps in contextual data for rural places. For example, demographic data from the U.S. Census and flood maps from the National Flood Insurance Program were either insufficient or outdated. This lack of timely and reliable data highlighted the value of integrating indigenous knowledge in planning for resilience, which can validate and supplement data from traditional sources. Third, citizens were eager to participate in the process when invited to and given the authority to make informed decisions based on technical data, with some coaching from a skilled facilitator. Asking citizens to the table, providing them with access to data, trusting their analyses, and allowing them to choose the strategic priorities resulted in a greater appreciation of the inequities that leave some people vulnerable to disasters. This type of inclusive engagement also led to more buy-in about the execution of strategies. One of the most valuable takeaways for the MDC team in managing the EPD was witnessing how developing rural leadership capacity and positioning that capacity to raise disaster awareness morphed into conversations about how to deploy that capacity in new ways to address persistent barriers to equitable outcomes.

Participatory planning processes in rural communities affected by

disasters can foster new social connections within and between sites through peer meetings, increased civic engagement, amplified social capital and inspired innovation. Indeed, a common feature of any MDC-led demonstration project is the opportunity for cross-site peer learning. EPD planning teams were invited to attend learning summits throughout the project. During these summits, participants engaged in small-group exercises with members from peer sites and their fellow team members to process lessons learned and promote the cross-pollination of ideas. Such a process facilitated sustained connections, innovation and commitment beyond the end date of the EPD. Of course, resources to support expert meeting design and strong facilitation are required to create thoughtful public discourse and peer learning. Unfortunately, many rural communities do not have the resources necessary to retain professional staff or hire consultants who can design and manage collaborative resilience planning conversations and shared learning opportunities.

Since rural communities typically lack sufficient resources to move from planning to implementation, access to community participation funds is a crucial ingredient for inclusive engagement. For the EPD, we encouraged the funder to set aside resources (up to \$25,000 per site) for every community to implement at least one promising strategy. The guarantee of implementation grants created a strong incentive for teams to stay committed to the planning process, especially for the typically low-resource emergency management departments. Grants also meant teamwork was not speculative, because there was a tangible return on the time and energy invested during the months spent on planning. In short, without access to technical assistance and other resources for planning and implementation, rural communities will struggle to become more resilient.

Accessing and Distributing Funding

In theory, communities have access to an influx of public and private money after natural disasters, but they often lack the organization to receive and distribute assistance effectively. Recovery in rural communities is typically led by ad hoc long-term recovery groups (LTRGs)—volunteers with little to no collaborative history, no legal capacity to receive grants, and no budgetary expertise to manage grants. As a result, money that could go

directly to the community from public and private sources is diverted to more-established organizations (e.g., American Red Cross) presumably on behalf of the community, without a guarantee the funds will be used wisely or at all for their intended beneficiaries. However, in some cases and with subsequent disasters, these ad hoc groups can become more formal, receive grants directly and mentor other emerging LTRGs. Researchers who study how social capital is mobilized in response to disasters and the evolution of disaster-responding organizations have documented how these groups move from impromptu neighborhood rescue efforts to certified nonprofits—with members specializing in emergency management systems—that continue to aid the community and others after disasters.¹ They also expand their networks and coordinate their efforts using social media. Perhaps the most well-known example of this is the Cajun Navy, which originated in response to Hurricane Katrina as volunteers used their personal boats to rescue thousands of people from flooding. Today the Cajun Navy has a foundation to manage donations and is a network of multiple volunteer-based organizations with many skills, including case management, construction, and food preparation and distribution.

Research and practice have demonstrated that the return on investment for the time and effort spent on planning for resilience before a disaster strikes can be at least six times the cost of relief and recovery.² Also, the granting of some federal relief money requires a local plan to be in place before funding can be approved. Moreover, as some of the challenges and opportunities that come are unpredictable post-disaster, every resilience plan should include which public or private entity will serve as the fiscal agent to accept and distribute resources equitably and equitably, efficiently, and according to the community's resilience goals.

Forward-Thinking Plan Implementation

Resilience planning must be universal and continuous. All systems must include strategies to reduce the negative impacts from disasters with a keen focus on the continuity of operations—especially when it comes to the supply chains and safety nets that maintain economic security for everyone in the community.

In addition, while a local plan is key to resilience, community leaders must address the broader set of issues that promote economic insecurity and undermine resilience in communities. That is, a significant factor in the difference between recovery (i.e., typically defined as a return to the status quo) and resilience is the leadership in place to support a rural community's transformation from its past (i.e., vulnerable to environmental and economic threats) to its future (equitable and resilient). To that end, rural leaders should be change agents, with an integral role in shepherding a community into the future. Leaders and funders should do so by making strategic upstream investments in the parts of rural life that connect people to an infrastructure of opportunity and the resources they need to prepare for, survive and recover from disasters. For example, access to broadband, employment and health care are crucial to the vitality and resilience of rural communities during and after disasters, as well as at any other time.

Broadband: Community resilience cannot happen without addressing the digital divide. Access to affordable broadband is necessary for communities to prepare the next generation of workers, to facilitate the connection between rural workers and urban employers, and to support small-business development, telehealth services and other community assistance needs. It is also critical to expediting the filing of paperwork for disaster recovery or unemployment funds. However, local preemptions, restrictions and roadblocks discourage governmental participation in establishing affordable broadband networks for rural residents. Research has found that residents in states with no roadblocks to or restrictions against municipal broadband have, on average, 10% greater access to low-cost³ broadband.⁴

Medicaid expansion: Health care delivery, insurance access and the preservation of health care jobs are essential for rural resilience. Rural areas in states that have expanded Medicaid have seen larger coverage gains than rural areas in non-expansion states. Medicaid expansion also has led to larger declines in uncompensated care costs and fewer hospital closures.⁵

The closure of a hospital has profound ripple effects on rural communities. In addition to reduced access to inpatient care, many residents are left without stable employment. Most closures and “abandoned” rural hospitals are in the South (60%), where poverty rates are higher, and people are generally less healthy and less likely to have health insurance. The typical rural

hospital employs about 300 people and serves a community of about 60,000. When the only hospital in a county closes, per capita income decreases by about \$1,400 (2018 dollars), making families and the community less able to recover and adapt after a disaster.⁶

Conclusion

True community resilience is rarely achieved, but the development of a plan can move a rural community closer to resiliency. The year 2020 laid bare the challenges that rural communities continue to face in creating a society that works for all, despite being beholden to policies and decisions antithetical to their very survival. Rural resilience will require a different way of working, advanced planning, inclusive leadership and supportive societal infrastructure.

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Endnotes

- ¹ See Meyer et al.
- ² See National Institute of Building Sciences.
- ³ Low-priced broadband is classified as any stand-alone internet plan at \$60 per month or less.
- ⁴ See Chamberlain.
- ⁵ See Center on Budget and Policy Priorities.
- ⁶ See The University of North Carolina at Chapel Hill.

